



# WASHINGTON COUNTY HEALTH DEPARTMENT

1302 Pennsylvania Avenue • Hagerstown, MD 21742

www.washhealth.org

## CAMPGROUND PERMIT APPLICATION

NAME/TITLE OF APPLICANT \_\_\_\_\_

CAMPGROUND NAME \_\_\_\_\_

CAMPGROUND ADDRESS \_\_\_\_\_

TELEPHONE – CAMPGROUND \_\_\_\_\_

E-MAIL ADDRESS – CAMPGROUND \_\_\_\_\_

OWNER NAME \_\_\_\_\_

OWNER ADDRESS \_\_\_\_\_

TELEPHONE – OWNER \_\_\_\_\_

E-MAIL ADDRESS – OWNER \_\_\_\_\_

EXACT LOCATION OF CAMPGROUND \_\_\_\_\_

DATE CAMPGROUND OPENS \_\_\_\_\_ CLOSSES \_\_\_\_\_

APPROXIMATE NUMBER OF SITES OR ACCOMMODATIONS \_\_\_\_\_

TYPE OF WATER SUPPLY \_\_\_\_\_

TYPE OF SEWAGE DISPOSAL \_\_\_\_\_

TYPE OF GARBAGE DISPOSAL \_\_\_\_\_

IS FOOD TO BE SOLD? ☐ YES ☐ NO

DATE \_\_\_\_\_

SIGNATURE \_\_\_\_\_

### *OFFICE USE ONLY*

RECEIPT NO. \_\_\_\_\_ PERMIT NO. \_\_\_\_\_ DATE ISSUED \_\_\_\_\_

REV. 2/9/09

ENVIRONMENTAL HEALTH  
13332 Pennsylvania Avenue  
Hagerstown, Maryland 21742

240-313-3400 Voice • 240-313-3391 TDD • 240-313-3424 Fax